

Initial Application Date: 2/15/17

Application # 1750040754

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: Moses T. Farmer / Melaniz Farmer Mailing Address: 4430 McDougald Rd.
City: Lillington State: NC Zip: 27546 Contact No: _____ Email: farmgas@embarqmail.com

APPLICANT: Moses T Farmer Mailing Address: 4430 McDougald Rd.
City: Lillington State: NC Zip: 27546 Contact No: _____ Email: farmgas@embarqmail.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Moses Farmer Phone # 910-890-2300

PROPERTY LOCATION: Subdivision: _____ Lot #: 1A Lot Size: 33,000 sq ft.
State Road # 1252 State Road Name: Ernest Brown Rd. Map Book & Page: 2017/49
Parcel: 90 13 0529 000901 PIN: 90 0538-09-2736 00D
Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 3063/8666 Power Company: South River Emc

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size 55' x 74') # Bedrooms: 4 # Baths: 4 Basement(w/wo bath): _____ Garage: Deck: _____ Crawl Space: Slab: _____ Slab: _____
(Is the bonus room finished? () yes (X) no w/ a closet? () yes (X) no (if yes add in with # bedrooms))
- Mod. (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement (w/wo bath): _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(Is the second floor finished? () yes () no Any other site built additions? () yes () no)
- Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built?) Deck: _____ (site built?)
- Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? () yes () no

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) ***Must have operable water before final**

Sewage Supply: New Septic Tank (Complete Checklist) _____ Existing Septic Tank (Complete Checklist) _____ County Sewer

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

Structures (existing or proposed): Single family dwellings: 1 Manufactured Homes: _____ Other (specify): _____

SFD
Comments: _____

Required Residential Property Line Setbacks:

Front	Minimum	<u>35'</u>	Actual	<u>55'</u>
Rear		<u>25'</u>		<u>50'</u>
Closest Side		<u>10'</u>		<u>55'</u>
Sidestreet/corner lot				
Nearest Building on same lot				

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Take Hwy 27 West, turn right on Ernest Brown Rd. Approx 1/2 mile to site on right.

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Moes T Farmer
Signature of Owner or Owner's Agent

2/15/17
Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

This application expires 6 months from the initial date if permits have not been issued

NAME: Moses T Farmer

APPLICATION #: _____

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # _____

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

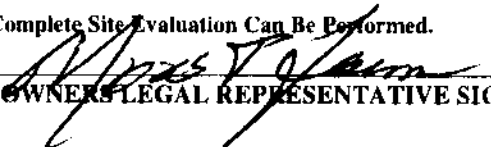
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 Alternative Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 YES NO Is any wastewater going to be generated on the site other than domestic sewage?
 YES NO Is the site subject to approval by any other Public Agency?
 YES NO Are there any Easements or Right of Ways on this property?
 YES NO Does the site contain any existing water, cable, phone or underground electric lines?
 If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.



 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2/15/17

 DATE

HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400

Phone (910) 893-8743 / Fax (910) 893-3594

www.halowensoil.com

6 February 2017

Mr. Moses Farmer
4430 McDougald Road
Lillington, NC 27546

Reference: Final Report for Comprehensive Soil Investigation
Minor Subdivision of Property of Moses T. Farmer – Lot 1A

Dear Mr. Farmer,

A comprehensive soil investigation has been conducted at the above referenced property, located on the northern side of Ernest Brown Road (SR 1252) in the Upper Little River Township of Harnett County, North Carolina. The purpose of the investigation was to determine the ability of this lot to support a subsurface sewage waste disposal system and repair area for a typical three-bedroom home. All soil ratings and determinations were made in accordance with "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900". It is our understanding that individual septic systems and public water supplies will be utilized at this site. The maximum house footprint used for this evaluation was 50 X 50 feet. Wetlands were not observed on this lot.

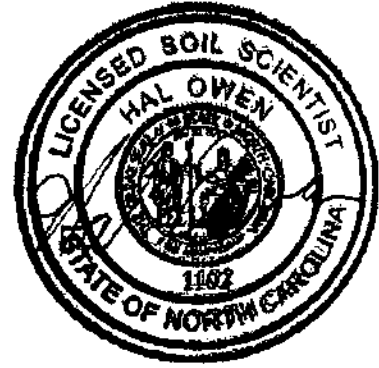
This lot is dominated by provisionally suitable soils for subsurface sewage waste disposal. These provisionally suitable soils were observed to be firm clays to greater than 36 inches and appear adequate to support a long term acceptance rate of 0.3 gal/day/sqft. It appears that the soils on this lot are adequate to support a conventional septic system and repair area for one residence.

This soil investigation report and map, when provided to the Harnett County Health Department, should allow them to sign the maps for recordation. I appreciate the opportunity to provide this service and hope to be allowed to assist you again in the future. If you have any questions or need additional information, please contact me at your convenience.



Sincerely,


Hal Owen
Licensed Soil Scientist




Final Report for Comprehensive Soil Investigation
Minor Subdivision of Property of Moses T. Farmer – Lot 1A
6 February 2017

Soil Map

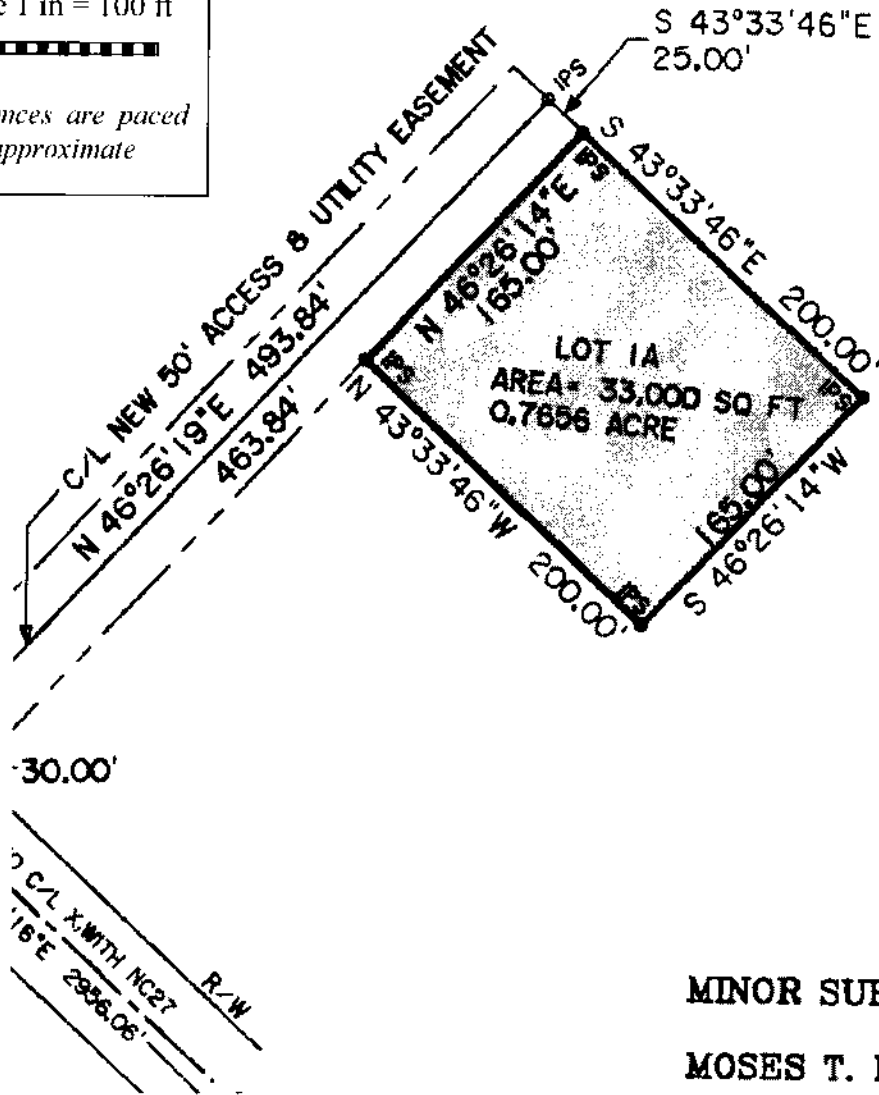
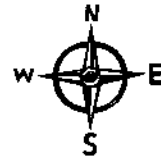
Soil Map Legend

 Provisionally Suitable Soils

Scale 1 in = 100 ft



*Distances are paced
and approximate*



09/09/11

Application #

17-5-46754

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address company name & phone must match.

Application for Residential Building and Trades Permit

Owner's Name MOSES FARMER Date 7-APRIL-2017

Site Address ERNEST BROWN RD LILLINGTON Phone _____

Directions to job site from Lillington Highway 27 WEST, RIGHT ONTO EARNEST BROWN
JOB ON RIGHT.

Subdivision NA Lot _____

Description of Proposed Work NEW SINGLE FAMILY HOME # of Bedrooms 4

Heated SF 2960 Unheated SF 2036 Finished Bonus Room? NO Crawl Space YES Slab _____

General Contractor Information

BRAD D. CUMMINGS CONST. CO. INC.

919-770-4693
Telephone

Building Contractor's Company Name

PO BOX 145 SANFORD

Email Address

Address

68866

License #

Electrical Contractor Information

Description of Work NEW ELECTRICAL Service Size _____ Amps T-Pole Yes No

PIONEER ELECTRICAL - NEIL THOMAS

919-499-7767
Telephone

Electrical Contractor's Company Name

80 NEIL THOMAS RD LILLINGTON

Email Address

Address

21643

License #

Mechanical/HVAC Contractor Information

Description of Work NEW HVAC SYSTEM

CAROLINA AIR

910 947 7707
Telephone

Mechanical Contractor's Company Name

3700 US 15 501 CAROLINA

Email Address

Address

23549

License #

Plumbing Contractor Information

Description of Work PLUMBING # Baths _____

WAGNER PLUMBING - JIR WAGNER

910 890 2299
Telephone

Plumbing Contractor's Company Name

555 TURZAH DR

Email Address

Address

31576

License #

Insulation Contractor Information

TRI CITY

910-486-8855
Telephone

Insulation Contractor's Company Name & Address

*NOTE General Contractor must fill out and sign the second page of this application

I hereby certify that I have the authority to make necessary application that the application is correct and that the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors site plan number of bedrooms building and trade plans Environmental Health permit changes or proposed use changes I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00 After 2 years re-issue fee is as per current fee schedule


Signature of Owner/Contractor/Officer(s) of Corporation

7-APRIL-2017
Date

Affidavit for Worker's Compensation N C G S 87-14

The undersigned applicant being the

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s) firm(s) or corporation(s) performing the work set forth in the permit

Has three (3) or more employees and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance covering themselves

Has no more than two (2) employees and no subcontractors

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person firm or corporation carrying out the work

Company or Name

BRETT D. CUMMINGS CONST. CO. INC.

Sign w/Title


PRES.

Date

7-APRIL-2017